Attorney Docket No. 0662–0163P

## BIRCH, STEWART, KOLASCH & BIRCH, LLP

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING

Page 1 of 2

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## COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Use of harpagid-related compounds for prevention

nsert Title:	and treatme	ent of ost ceutical c	eoporosis, composition	arthritis containin	and rupt g the sam	ured dis	C
Fill in Appropriate Information - For Use Without	the specification	on was filed on	ereto. If not attached here		,		as
Specification	United States Application Number					<u> —</u> (іг арріісавіе,	and/or
Attached:	ale specification	on was med on					_ as i C i
		er PCT Article 19 on	·			; (if ap:	and was plicable)
galang Takang				ntents of the above	identified enecific	,	•
	I hereby state that I have reviewed and understand the contents of the above-identified specificat amended by any amendment referred to above.  I acknowledge the duty to disclose information which is material to patentability as defined in the content of the co						
	Regulations, □ .56.  I do not know and do not believe the same was ever known or used in the United States of America before my or our inventior thereof, or patented or described in any printed publication in any country before my or our invention thereof or more than one year prior to this application, that the same was not in public use or on sale in the United States of America more than one year prior to this application, that the invention has not been patented or made the subject of an inventor's certificate issued before the clate of this application in any country foreign to the United States of America on an application filed by me or my legal representative or assigns more than twelve months (six months for designs) prior to this application, and that no application to patent or inventor's certificate on this invention has been filed in any country foreign to the United States of America prior to this application by me or my legal representatives or assigns, except as follows.  I hereby claim foreign priority benefits under Title 35, United States Code, □ 19(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:						
inia Para Para Para Para Para Para Para Par	Prior Foreign Ap	plication(s)				Priority C	Claimed
hisert Priority Iriformation:	2000-7149	7 Republi	<u>c of Ko</u> rea	11/29	/2000		
(if appropriate)	(Number)	(Country)		(Month/Day/Y	ear Filed)	Yes	No
garage service							
•	(Number)	(Country)	<del></del>	(Month/Day/Y	(ear Filed)	Yes	No
	(Number)	(Country)		(Month/Day/Y	(ear Filed)	☐ Yes	□ No
	(Number)	(Country)		(Month/Day/Y	(ear Filed)	☐ Yes	□ No
	I hereby claim the l	oenefit under Title 3	5, United States Code, 🛘	19(e) of any United	States provisional a	applications(s) lis	sted below
Insert Provisional Application(s): (if any)	(Application Numb	per)		(Filing Date	e)		
	(Application Number) (Filing Date)						
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application:						
	Country		Application Number	E	Date of Filing (Monti	n/Day/Year)	
Insert Requested Information: (if appropriate)							
	I hereby claim the benefit under Title 35, United States Code, 20 of any United States and/or PCT application(s) listed below and insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, 21, I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, 25 which became available between the filing date of the prior application and the national or PCT international filing date of this application						
Insert Prior U.S. Application(s): (if any)	(Application Numl	oer)	(Filing Date)	(8	Status - patented, pe	ending, abandon	ed)
	(Application Numl	per)	(Filing Date)	(5	Status - patented, pe	ending, abandon	ed)

Attorney Docket No.

I hereby appoint the following attorneys to prosecute this application and/or an international application based on this application and to transact all business in the Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the attorneys identified below, unless the inventor(s) or assignee provides said attorneys with a written notice to the contrary:

Raymond C. Stewart	(Reg. No. 21,066)	Terrell C. Birch	(Reg. No. 19,382)
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Bernard L. Sweeney	(Reg. No. 24,448)	Michael K. Mutter	(Reg. No. 29,680)
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

	DITHER PRODUCTION LAW INC.		DATE*
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*
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Kangnam-ku, Seoul, Kor	entai medicine, c ea	000/ 21111	iisa-doily,
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Sang Tae, Kim	Gang fal Om	Mar.	11/13/2001
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Dobong-ku, Seoul, Kore	a	المنافقة المستحد المراجع	
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GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*
Residence (City, State & Country)	1	CITIZENSHI	P
POST OFFICE ADDRESS (Complete Street Addr	ess including City, State & Country	)	
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PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

ruli Name pi Farst
or Sole inventor:
Insert Name of
Inventor:
Insert Dete This
Document is Signed

Insert Citizenship
Insert Post Office
Address

Full Name effectiond
Inventorations:

Full Name of Third Inventor, if any: see above

Full Name of Fourth Inventor, if any: see above

Full Name of Fifth Inventor, if any: see above

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Applicant or Patentee: <u>SHIN, Jo</u> Serial or Patent No.: <u>NEW</u>	·	Attorney's 0662-016.  Docket No.:
Filed or Issued: November 29, 2		
VERIFIED STATEM STATUS (37 CFR	MENT (DECLARATION) CLAIM! 1.9(f) and 1.27 (b)) — INDEPEN	NG SMALL ENTITY IDENT INVENTOR
CFR 1.9(c) for purposes of paying Code, to the Patent and Trademark related compounds for arthritis and rupture composition containing	reduced fees under section 41( k Office with regard to the invent c prevention and treed disc and pharmace ng the same"	dependent inventor as defined in 37 a) and (b) of Title 35, United States tion entitled "Use of harpagicatment of osteoporosis entical described in:
( ) patent no.	, issued _	iled
assign, grant, convey or license, ar an independent inventor under 37 which would not qualify as a smal under 37 CFR 1.9(e).	ny rights in the invention to any p CFR 1.9(c) if that person had ma I business concern under 37 CF	o obligation under contract or law to erson who could not be classified as ade the invention, or to any concern R 1.9(d) or a nonprofit organization
Each person, concern or organiza under an obligation under contract isted below.	tion to which I have assigned, gr or law to assign, grant, convey, o	ranted, conveyed, or licensed or am r license any rights in the invention is
<ul><li>(X) no such person, concern</li><li>( ) persons, concerns or org</li></ul>		
	tements are required from each r ntion averring to their status as s	named person, concern or organiza- mall entities. (37 CFR 1.27)
FULL NAME Joon Shik,	SHIN	do Chinas
ADDRESS Hospital of J dong, Kangnam () INDIVIDUAL ()	aseng Oriental Medi -ku, Seoul, Korea SMALL BUSINESS CONCERN	cine,635,Shinsaeng ( ) NONPROFIT ORGANIZATION
FULL NAME Sang Tae, No.401, Doosa ADDRESS Dobong-ku, Se	Kim n Green Villa, 349-	15, Ssangmoon-dong,
ADDRESS <u>Dobong-ku, Se</u> ()INDIVIDUAL ():	SMALL BUSINESS CONCERN	( ) NONPROFIT ORGANIZATION
FULL NAME Yong Nam,	Han reummael, <u>1</u> 32, Emae-	-dong, Bundan-ku,
#306-1101, An ADDRESS Seongnam-shi	<u>, Kyungki-do, Korea</u>	
() INDIVIDUAL ():	SMALL BUSINESS CONCERN	( ) NONPROFIT ORGANIZATION
in loss of entitlement to small entity	status prior to paying, or at the ti	tion of any change in status resulting me of paying, the earliest of the issue small entity is no longer appropriate.
made on information and belief are the knowledge that willful false sta or both, under section 1001 of Titl	believed to be true; and further to tements and the like so made are e 18 of the United States Code, a	edge are true and that all statements hat these statements were made with punishable by fine or imprisonment, and that such willful false statements thereon or any patent to which this
NAME OF INVENTOR	NAME OF INVENTOR	NAME OF INVENTOR
Joon_Shik, Shin Signature of Inventor	Sang Tae, Kim Signature of Inventor	Yong Nam, Han Signature of Inventor
Think I all K	Canto Man On	n San I.N.
Date Date	Date Date	Date
Nov.13, 2001	Nov.13, 2001	Nov.13, 2001